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DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
NATIONAL INSTITUTES OF HEALTH
BETHESDA, MARYLAND 20014

February 23, 1973

Clayton Rich, M.D.
School of Medicine
Stanford University Medical Center
Stanford, California 94305

Dear Dr. Rich:

This is in response to your letter of January 31, 1973, addressed to the President, regarding the National Institutes of Health (NIH) research training programs. The decision to phase out gradually Federal support for research training reflected in the 1974 budget was reached after careful review and is based upon a number of considerations.

Under the phaseout all ongoing programs with continuing commitments will be funded through the balance of the current commitment to trainees, but no new research training grants will be made. The President has requested \$129 million for the NIH research training programs for fiscal year 1974. This request represents a decrease in the program level from \$186 million in 1972, and reflects the gradual termination for these programs.

In general, the President believes that Federal assistance for higher and graduate education should be concentrated on students in financial need. Moreover, it is difficult to justify singling out graduate students in the life sciences as recipients of special Federal subsidies, when graduate students in other physical sciences, engineering, public administration, the arts and the humanities, etc., do not benefit from a targeted special Federal program. The decision to phase out research training support will eliminate the inequity of providing special Government subsidies for the support of selected students in the life sciences, particularly in a program that does not target funds on needy or disadvantaged students.

The phaseout of support for direct training of biomedical research personnel and the fact that a number of research projects in this field go unfunded each year are closely related. This situation, taken with the recent increases in Federal support for biomedical research, suggests that there is now an

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excess of qualified scientific manpower in many areas. In any event, it is expected that normal processes of supply and demand plus indirect training under existing NIH research programs will yield adequate research manpower needs in various biomedical fields.

Beneficiaries of research training support--whether M.D.'s or Ph.D.'s--are generally qualified for jobs with substantial future income potential. Such persons are generally able to afford the cost of loans and other general financial assistance for their education--as an investment in their own futures--to the same extent to which society expects other students to finance their professional training. In addition, indirect training opportunities will continue to be available for students who are paid from research grants and contracts for their work on the projects. General student assistance programs are available to all graduate students through the Office of Education.

While I appreciate your concern for this individual program, I am certain you realize that the demand for continuation and growth in all programs in the aggregate is more than our limited resources can support. In the program you describe and others, provision has been made for a gradual transition away from Federal dependency whenever continued Federal subsidy is inappropriate.

I hope this information is helpful in explaining the basis for the decision to phase out research training support.

Sincerely yours,

A handwritten signature in cursive script, reading "Thomas E. Malone".

Thomas E. Malone, Ph.D.
Associate Director for Extramural
Research and Training